



**Unified Government  
Parks and Recreation**

[www.wycokck.org/parks](http://www.wycokck.org/parks)

## YOUTH REGISTRATION FORM

At the time of registration, parents/guardians will be required to sign a permission slip. Mail-In or Walk-In Registration at the Parks and Recreation Office, 5033 State Ave., Kansas City, KS 66102. Personal checks are not accepted. Cash or a money order made payable to Unified Treasury must accompany this form. Mastercard, Visa and Discover are also accepted. Office hours are 8:30 a.m. to 4:30 p.m., Monday through Friday. The first week of programming begins Monday, June 4. Class size is limited and space will be filled on a first come first serve basis. If space is available, registration will be accepted throughout the summer at the Parks and Recreation office only.

**Expected Participation Behavior:** The U.G. Parks and Recreation Department requires a participant's behavior while in attendance at special events, programs or classes to be that which will enable all who attend to have an enjoyable recreational or leisure experience. The requirement demands no spiting, scratching, pinching, fighting, biting, temper tantrums, bullying or any other type of disruptive behavior, as well as, to be "toilet trained". In the event of any disruptive behavior, the Parks and Recreation Department reserves the right to take action up to and /or expulsion from an event or program.

**PLEASE PRINT and use one form for each child you are registering.**

Child's Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_  
 Parent/Guardian Name \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home/Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
 Is Participant Bilingual? Yes \_\_\_\_\_ No \_\_\_\_\_ Has this person participated in any other recreational activities sponsored by U.G. Parks and Recreation? Yes \_\_\_\_\_ No \_\_\_\_\_

We must have an emergency contact for the hours the child is attending programs at the community center. **Please list emergency contact below.**

Name \_\_\_\_\_  
 Home/cell phone \_\_\_\_\_  
 Work phone \_\_\_\_\_  
 Hours at this number \_\_\_\_\_

**I am registering for:**

**Basketball    Bittyball    Soccer    Kickball    T-ball    Softball**  
**Volleyball    Flag Football    Other Program** \_\_\_\_\_

Total Paid \$ \_\_\_\_\_  
 (cash or money order made payable to Unified Treasury)

**Refund Policy:** Any refund must be requested four business days prior to the start of class. Refunds will not be given after the start of class.

The undersigned states that he/she understands that the Unified Government of Wyandotte County/Kansas City, KS Parks and Recreation is not and shall not be responsible for or liable for any illness, or injury to person or damage to property resulting from the program in which the undersigned is enrolling or being enrolled or from his/her participation in said program and the participant and the undersigned, if the participant is a minor or under other legal disability, hereby forever releases and holds harmless the said U. G. of Wy. Co./KCKS Parks and Recreation its employees agents and representatives from any and all claims of any kind that the participant or the undersigned or their respective heirs, executors, administrators, or assign may have or claim to have resulting from participation in said program. Also, the undersigned and the participant authorize the U. G. of Wy. Co./KCKS Parks and Recreation to use at its discretion any photograph(s) (black/ white or color) taken of the participant while participating in the program and waive any and all claims that the participant or undersigned or their heirs, executors, administrators, or assigns may have or claim to have resulting from such photograph(s) or reproductions thereof.

**I have read and understand the waiver statement, the registration and cancellation policies.**

**Registration invalid without signature.** \_\_\_\_\_